NONPROVISIONAL PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OLIFF & BERRIDGE, PLC Attorney Docket No.: 117122 P.O. Box 19928 Date: September 10, 2003 Alexandria, Virginia 22320 Telephone: (703) 836-6400 Facsimile: (703) 836-2787 MAIL STOP PATENT APPLICATION NONPROVISIONAL APPLICATION TRANSMITTAL Customer Number: 25944 **RULE §1.53(b)** Commissioner for Patents ₅ P.O. Box 1450 Alexandria, VA 22313-1450 . Sir: Transmitted herewith for filing under 37 C.F.R. §1.53(b) is the nonprovisional patent application TEXT SENTENCE COMPARING APPARATUS For (Title): Shaoming LIU By (Inventors): \boxtimes Formal drawings (Figs. 1-13; 7 sheets) are attached. Use Figure for front page of Publication. A Declaration and Power of Attorney is filed herewith. This application claims benefit of Provisional Application No. _ (A Preliminary Amendment is attached to reflect this claim in the Specification if not already present.) This patent application is assigned to FUJI XEROX CO., LTD. The executed Assignment is filed herewith. An Information Disclosure Statement is filed herewith. Entitlement to small entity status is hereby asserted. A Preliminary Amendment is filed herewith. Priority of foreign application No. 2002-268728 filed September 13, 2002 in JAPAN is claimed (35 U.S.C. §119). A certified copy of the above corresponding foreign application is filed herewith. This application is NOT to be published under 35 U.S.C. 112(b). The undersigned attorney or agent hereby certifies that the invention disclosed in this application has not been and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication at eighteen months after filing. \boxtimes The filing fee is calculated below: CLAIMS IN THE APPLICATION AFTER ENTRY OF ANY PRELIMINARY AMENDMENT NOTED ABOVE OTHER THAN A **SMALL ENTITY** SMALL ENTITY FOR: NO. FILED NO. EXTRA **RATE** FEE OR **RATE** FEE **BASIC FEE** \$ 375 \$ 750 <u>OR</u> **TOTAL CLAIMS** 28 - 20 8 x 9 = \$ <u>OR</u> 18 \$ 144 INDEP CLAIMS 4 - 3 42 = \$ 84 <u>OR</u> \$ 84 х ☐ MULTIPLE DEPENDENT CLAIMS PRESENTED + 140 =\$ <u>OR</u> + 280 \$

Check No. 146110 in the amount of \$978 to cover the filing fee is attached. Except as otherwise noted herein, the Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

\$

TOTAL

<u>OR</u>

\$ 978

James A. Oliff

TOTAL

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* If the difference is less than zero, enter "0".